

**COUNTY OF SAN BERNARDINO
CALIFORNIA**

Corrective Action Plan

Year ended June 30, 2006

COUNTY OF SAN BERNARDINO, CALIFORNIA

Corrective Action Plan

Year ended June 30, 2006

Findings 2006-1

Program: Child Support Enforcement

CFDA No.: 93.563

Federal Agency: Department of Health and Human Services

Passed through: State Department of Child Support Services

Award Year: Fiscal Year 2005-2006

Compliance Requirement: Eligibility/Special Tests & Provisions

Questioned Costs: None

Department's Response:

The Department (Child Support Services) concurs with the finding.

Corrective Action Plan:

Response from the Department of Child Support Services:

The failure to meet timeframes for establishing a case record within 20 days of receipt of the application was due to

- Issues associated with the conversion to a new computer database on June 1, 2005.
- Effective immediately, the 2.1 applications and new case statements will be date stamped the day they are received at DCSS.

Name of Responsible Person: Connie Brunn Director, Department of Children Support Services

Name of Department Contact: Laura Corral-Flores, Deputy Director Department of Child Support Services

Expected date of Completion: June 30, 2006

COUNTY OF SAN BERNARDINO, CALIFORNIA

Corrective Action Plan

Year ended June 30, 2006

Findings 2006-2

Program: Medi-Cal Cluster

CFDA No.: 93.778

Federal Agency: Department of Health and Human Services

Passed-Through: California Department of Health Services, California Department on Aging, California Department of Social Services, and California Department of Alcohol and Drugs.

Award Year: Fiscal Year 2005-2006

Compliance Requirement: Eligibility

Questioned Costs: Unknown

Department's Response:

The Department (Transitional Assistance Department - TAD) concurs with the finding.

Corrective Action Plan:

To ensure Eligibility Workers (EWs) complete re-evaluations (REs) timely, as well as ensure the proper documentation to support eligibility is in the case files, the following plans are, or will be put into place with respect to each finding:

Re-Evaluations (REs) – TAD is currently in the final developmental phase of creating Medi-Cal Workflow tools, which will assist line staff and supervision in ensuring REs are initiated and completed timely. All materials have been created and are scheduled for release in April 2007, with an implementation date of May 1, 2007.

TAD has also revised the case review process to select cases that had an RE due the month prior. This action is intended to capture cases, based on the scheduled RE month, to ensure timely completion and correct processing.

IEVS – Policy Handbook information, released to staff in March 2007, outlines the IEVS process and gives an expectation that IEVS is requested for all program members at application, add person, and RE.

A question regarding the IEVS process has been added to the Medi-Cal Case Review System. This question will ensure IEVS is addressed in monthly case reviews.

Beginning approximately August 1, 2007 the C-IV system will automatically initiate a request for IEVS during the application process.

SS # Verification – Current Policy Handbook material clearly outlines procedures for staff to follow when requesting social security cards. However, TAD has identified the need to clarify specific timeframes for following up. TAD will issue a reminder to staff outlining verification timeframes. Supervisors will be reminded to follow up on tasks set to ensure appropriate action has been taken.

Name of Responsible Person: Nancy Swanson, Director

Name of Department Contact: Linda Kjeldgaard, Supervising Accountant III

Estimated date of completion: Implemented

COUNTY OF SAN BERNARDINO, CALIFORNIA

Corrective Action Plan

Year ended June 30, 2006

Findings 2006-3

Program: HIV Emergency Relief Formula Grant – Title I

CFDA No.: 93.914

Federal Agency: Department of Health and Human Services, Health Resource and Services Administration

Award Year: Fiscal Year 2004-2005

Compliance Requirement: Subrecipient Monitoring

Questioned Costs: None

Department's Response:

The Department (Public Health) concurs with the finding.

Corrective Action Plan:

1. The CFDA numbers were amended into subrecipient contracts in May 2006 and are included in subsequent contracts.
2. OMB Circular A-133 language was amended into subrecipient contracts in March 2005 and subsequent contracts.
3. The department was performing fiscal monitoring prior to FY 2004-05 and has restarted it in FY 2005-06 to ensure compliance with allowable costs principles. Additionally, the department has developed and implemented policies and procedures for contract and fiscal monitoring.
4. A Memorandum of understanding with the County operated clinic has been drafted and established in Fiscal Year (FY) 2006-2007 and for subsequent years.
5. The department has established policies and procedures for obtaining a single audit report from each subrecipient and has procedures in place to ensure that the subrecipient takes timely and appropriate corrective action on all findings.

Response to items identified during follow up procedures in FY 2005-06:

The department has developed and implemented policies and procedures for contract and fiscal monitoring. These include; 1. Requiring signature from Program Manager/Coordinator to demonstrate review and approval of subrecipient monitoring reports, 2. Supervisory oversight on correction action plan process, and 3. ensuring timely response to and following up on corrective action plans.

Name of Responsible Person: Beatriz Valdez, Chief Administrative Services

Name of Department Contact: Daniel Perez, Program Coordinator

Expected date of completion: April 3, 2007

COUNTY OF SAN BERNARDINO, CALIFORNIA

Corrective Action Plan

Year ended June 30, 2006

Findings 2006-4

Program: HIV Emergency Relief Formula Grant – Title I

CFDA No.: 93.914

Federal Agency: Department of Health and Human Services, Health Resources and Services Administration

Award Year: Fiscal Year 2004-2005 and 2005-2006

Compliance Requirement: Cash Management/Period of Availability

Questioned Costs: None

Department's Response:

The Department (Public Health) concurs with the finding.

Corrective Action Plan:

1. The County determined that the advancement of funds incurred interest of \$45,637.57 and reimbursed the Federal agency on November 20, 2006.
2. The County has developed and implemented policy and procedures to ensure compliance with actual reporting.

The County has developed and implemented policy and procedures to ensure management's approval.

Name of Responsible Person: Beatriz Valdez, Chief of Administrative Services

Name of Department Contact: Daniel Perez, Program Coordinator

Estimated date of completion: Implemented

COUNTY OF SAN BERNARDINO, CALIFORNIA

Corrective Action Plan

Year ended June 30, 2006

Findings 2006-5

Program: State Homeland Security Grant Program

CFDA No.: 97.067

Federal Agency: Department of Homeland Security

Passed-Through: California Department of Emergency Services

Award Year: Fiscal Year 2004-2005

Compliance Requirement: Allowable/Unallowable Costs

Questioned Costs: None

Department's Response:

The Department (County Fire) concurs with the finding.

Corrective Action Plan:

The San Bernardino County Fire Dept./OES has instituted the process for requesting equipment revisions at the State level. Establishment of these policies and procedures are in process. The San Bernardino County Office of Emergency Services will continue processing equipment revisions following the Governor's Office of Homeland Security modification procedures.

Name of Responsible Person: Denise Benson, OES Division Manager, County Fire

Name of Department Contact: Claudia Davalos, Staff Analyst, County Fire

Jim Ogden, Administrative Supervisor, County Fire

Expected date of completion: Implemented